

BIRCH, STEWART, KOLASCH & BIRCH, LLPP.O. Box 747 • Falls Church, Virginia 22040-0747
Telephone: (703) 205-8000 • Facsimile: (703) 205-8050PLEASE NOTE:
YOU MUST
COMPLETE THE
FOLLOWING**COMBINED DECLARATION AND POWER OF ATTORNEY
FOR PATENT AND DESIGN APPLICATIONS**

As a below named inventor, I hereby declare that: my residence, post office address and citizenship are as stated next to my name; that I verily believe that I am the original, first and sole inventor (if only one inventor is named below) or an original, first and joint inventor (if plural inventors are named below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

Insert Title:

PROCESS FOR PRODUCING CYTOTOXIC LYMPHOCYTESFill in Appropriate
Information -
For Use Without
Specification
Attached:

the specification of which is attached hereto. If not attached hereto,

the specification was filed on _____ as
United States Application Number _____;
and amended on _____ (if applicable) and/or
the specification was filed on August 19, 2004 as PCT
International Application Number PCT/JP2004/012238; and was
amended on _____ (if applicable)

I hereby state that I have reviewed and understand the contents of the above-identified specification, including the claims, as amended by any amendment referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in Title 37, Code of Federal Regulations, §1.56.

I do not know and do not believe the same was ever known or used in the United States of America before my or our invention thereof, or patented or described in any printed publication in any country before my or our invention thereof or more than one year prior to this application, that the same was not in public use or on sale in the United States of America more than one year prior to this application, that the invention has not been patented or made the subject of an inventor's certificate issued before the date of this application in any country foreign to the United States of America on an application filed by me or my legal representative or assigns more than twelve months (six months for designs) prior to this application, and that no application for patent or inventor's certificate on this invention has been filed in any country foreign to the United States of America prior to this application by me or my legal representatives or assigns, except as follows.

I hereby claim foreign priority benefits under Title 35, United States Code, §119(a)-(d) of any foreign application(s) for patent or inventor's certificate listed below and have also identified below any foreign application for patent or inventor's certificate having a filing date before that of the application on which priority is claimed:

Insert Priority
Information:
(if appropriate)**Prior Foreign Application(s)****Priority Claimed**

<u>2003-298208</u>	<u>Japan</u>	<u>August 22, 2003</u>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
(Number)	(Country)	(Month/Day/Year Filed)	Yes	No
<u>2004-000699</u>	<u>Japan</u>	<u>January 5, 2004</u>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
(Number)	(Country)	(Month/Day/Year Filed)	Yes	No
<u>2004-115648</u>	<u>Japan</u>	<u>April 9, 2004</u>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
(Number)	(Country)	(Month/Day/Year Filed)	Yes	No
<u>2004-222441</u>	<u>Japan</u>	<u>July 29, 2004</u>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
(Number)	(Country)	(Month/Day/Year Filed)	Yes	No

I hereby claim the benefit under Title 35, United States Code, §119(e) of any United States provisional applications(s) listed below.

Insert Provisional
Application(s):
(if any)

<u>(Application Number)</u>	<u>(Filing Date)</u>
<u>(Application Number)</u>	<u>(Filing Date)</u>

All Foreign Applications, if any, for any Patent or Inventor's Certificate Filed More than 12 Months (6 Months for Designs) Prior to the Filing Date of This Application:

Insert Requested
Information:
(if appropriate)

Country	Application Number	Date of Filing (Month/Day/Year)
<u> </u>	<u> </u>	<u> </u>
<u> </u>	<u> </u>	<u> </u>

I hereby claim the benefit under Title 35, United States Code, §120 of any United States and/or PCT application(s) listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States and/or PCT application in the manner provided by the first paragraph of Title 35, United States Code, §112, I acknowledge the duty to disclose information which is material to the patentability as defined in Title 37, Code of Federal Regulations, §1.56 which became available between the filing date of the prior application and the national or PCT international filing date of this application.

Insert Prior U.S.
Application(s):
(if any)

<u>(Application Number)</u>	<u>(Filing Date)</u>	<u>(Status - patented, pending, abandoned)</u>
<u>(Application Number)</u>	<u>(Filing Date)</u>	<u>(Status - patented, pending, abandoned)</u>

I hereby appoint the practitioners at **CUSTOMER NO. 2292** as my attorneys or agents to prosecute this application and/or an international application based on this application and to transact all business in the United States Patent and Trademark Office connected therewith and in connection with the resulting patent based on instructions received from the entity who first sent the application papers to the practitioners, unless the inventor(s) or assignee provides said practitioners with a written notice to the contrary.

Send Correspondence to:

BIRCH, STEWART, KOLASCH & BIRCH, LLP or **CUSTOMER NO. 2292**

P.O. Box 747 • Falls Church, Virginia 22040-0747

Telephone: (703) 205-8000 • Facsimile: (703) 205-8050

PLEASE NOTE:
YOU MUST
COMPLETE
THE
FOLLOWING:
↓

Full Name of First
or Sole Inventor:
Insert Name of
Inventor
Insert Date This
Document is Signed

Insert Residence
Insert Citizenship

Insert Mailing
Address

Full Name of Second
Inventor, if any:
see above

Full Name of Third
Inventor, if any:
see above

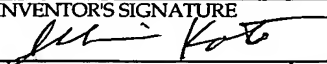
Full Name of Fourth
Inventor, if any:
see above

Full Name of Fifth
Inventor, if any:
see above

Full Name of Sixth
Inventor, if any:
see above

GIVEN NAME/FAMILY NAME Mitsuko IDENO	INVENTOR'S SIGNATURE <i>Mitsuko Ideno</i>	DATE* October 7, 2005
Residence (City, State & Country) Kyoto-shi, Kyoto 616-8176 Japan		CITIZENSHIP Japan
MAILING ADDRESS (Complete Street Address including City, State & Country) 28-7, Uzumasainui-cho, Ukyo-ku, Kyoto-shi, Kyoto 616-8176 Japan		
GIVEN NAME/FAMILY NAME Nobuko MURAKI	INVENTOR'S SIGNATURE <i>Nobuko Muraki</i>	DATE* October 12, 2005
Residence (City, State & Country) Koka-shi, Shiga 529-1851 Japan		CITIZENSHIP Japan
MAILING ADDRESS (Complete Street Address including City, State & Country) 520, Nagano, Shigaraki-cho, Koka-shi, Shiga 529-1851 Japan		
GIVEN NAME/FAMILY NAME Kinuko OGAWA	INVENTOR'S SIGNATURE <i>Kinuko Ogawa</i>	DATE* October 14, 2005
Residence (City, State & Country) Otsu-shi, Shiga 520-2134 Japan		CITIZENSHIP Japan
MAILING ADDRESS (Complete Street Address including City, State & Country) 8-8-203, Seta 3-chome, Otsu-shi, Shiga 520-2134 Japan		
GIVEN NAME/FAMILY NAME Masayuki KISHIMOTO	INVENTOR'S SIGNATURE <i>Masayuki Kishimoto</i>	DATE* October 7, 2005
Residence (City, State & Country) Otsu-shi, Shiga 520-2133 Japan		CITIZENSHIP Japan
MAILING ADDRESS (Complete Street Address including City, State & Country) 14-3-208, Nogohara 1-chome, Otsu-shi, Shiga 520-2133 Japan		
GIVEN NAME/FAMILY NAME Tatsuji ENOKI	INVENTOR'S SIGNATURE <i>Tatsuji Enoki</i>	DATE* October 7, 2005
Residence (City, State & Country) Kyotanabe-shi, Kyoto 610-0313 Japan		CITIZENSHIP Japan
MAILING ADDRESS (Complete Street Address including City, State & Country) 43, Miyamakinogami, Kyotanabe-shi, Kyoto 610-0313 Japan		
GIVEN NAME/FAMILY NAME Hiroaki SAGAWA	INVENTOR'S SIGNATURE <i>Hiroaki Sagawa</i>	DATE* October 7, 2005
Residence (City, State & Country) Kusatsu-shi, Shiga 525-0025 Japan		CITIZENSHIP Japan
MAILING ADDRESS (Complete Street Address including City, State & Country) 6-32, Nishishibukawa 2-chome, Kusatsu-shi, Shiga 525-0025 Japan		

Full Name of Seventh
Inventor, if any:
see above

GIVEN NAME/FAMILY NAME Ikunoshin KATO	INVENTOR'S SIGNATURE 	DATE* October 21, 2003
Residence (City, State & Country) Koka-shi, Shiga 529-1851 Japan		CITIZENSHIP Japan
MAILING ADDRESS (Complete Street Address including City, State & Country) 1454-15, Nagano, Shigaraki-cho, Koka-shi, Shiga 529-1851 Japan		

Full Name of Eighth
Inventor, if any:
see above

GIVEN NAME/FAMILY NAME	INVENTOR'S SIGNATURE	DATE*
Residence (City, State & Country)		CITIZENSHIP
MAILING ADDRESS (Complete Street Address including City, State & Country)		

Full Name of Ninth
Inventor, if any:
see above

GIVEN NAME/FAMILY NAME	INVENTOR'S SIGNATURE	DATE*
Residence (City, State & Country)		CITIZENSHIP
MAILING ADDRESS (Complete Street Address including City, State & Country)		

Full Name of Tenth
Inventor, if any:
see above

GIVEN NAME/FAMILY NAME	INVENTOR'S SIGNATURE	DATE*
Residence (City, State & Country)		CITIZENSHIP
MAILING ADDRESS (Complete Street Address including City, State & Country)		

Full Name of Eleventh
Inventor, if any:
see above

GIVEN NAME/FAMILY NAME	INVENTOR'S SIGNATURE	DATE*
Residence (City, State & Country)		CITIZENSHIP
MAILING ADDRESS (Complete Street Address including City, State & Country)		

Full Name of Twelfth
Inventor, if any:
see above

GIVEN NAME/FAMILY NAME	INVENTOR'S SIGNATURE	DATE*
Residence (City, State & Country)		CITIZENSHIP
MAILING ADDRESS (Complete Street Address including City, State & Country)		

Full Name of Thirteenth
Inventor, if any:
see above

GIVEN NAME/FAMILY NAME	INVENTOR'S SIGNATURE	DATE*
Residence (City, State & Country)		CITIZENSHIP
MAILING ADDRESS (Complete Street Address including City, State & Country)		